

I
Rural District of Amesbury



ANNUAL REPORTS

OF THE

MEDICAL OFFICER
OF HEALTH

AND

CHIEF PUBLIC HEALTH
INSPECTOR

FOR THE YEAR ENDED 1972



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MEMBERS OF THE PUBLIC HEALTH COMMITTEE (as at December, 1972)

Chairman: Councillor A. F. Ogburn

Vice-Chairman: Councillor Mrs. M. J. Crook

Councillor H. W. Annetts, M.B.E.

Councillor C. P. Goldong

Councillor P. R. G. Gutteridge

Councillor T. H. J. Hefferman

(Chairman of the Council)

Councillor G. C. Langdon

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Councillor L. W. Trim

Councillor D. E. West

Councillor D. F. White

Councillor A. W. Wilson

PUBLIC HEALTH OFFICERS OF THE AUTHORITY

Medical Officer of Health:

F. D. F. Steede, M.B., B.Ch., M.F.C.M., D.P.H.

Clerk (M.O.H. Office):

Miss G. M. Boswell,

Council Offices, 1 The Green, Marlborough.

Telephone: 2487 and 2474.

Chief Public Health Inspector:

I. L. Fisher, C.S.I.B., M.A.P.H.I.

Certified Meat and Food Inspector.

Deputy Chief Public Health Inspector:

R. Wilkinson, C.S.I.B., M.A.P.H.I.

Technical Assistant:

A. M. Hallett

Rodent Operator:

G. B. Oldham

Clerk (R.D.C. Office):

Mrs. P. Lock,

Public Health Department, The Council Offices,
Redworth House, Amesbury, Salisbury, Wilts.

Telephone: Amesbury 3255/6.

The Medical Officer of Health acts in a similar capacity for the Borough of Marlborough, and the Rural Districts of Marlborough and Ramsbury, and Pewsey. These combined districts have a population of 67,500 and an area of 235,289 acres. They have appointed a Joint Committee, the East Wilts United Districts (Medical Officer of Health) Committee, to deal with all matters relating to the office of Medical Officer of Health. The Medical Officer also performs duties for the Wiltshire County Council under the National Health Service and Education Acts.

RURAL DISTRICT OF AMESBURY

East Wilts United Districts (M.O.H.) Office,

1 The Green,

Marlborough.

Telephone: Marlborough 2487 and 2474.

To the Chairman and Councillors of the Rural District:

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my annual report for the year 1972, which seems likely to be my last one, since by the time one is in a position to write the 1973 report N.H.S. reorganisation will have extinguished the post of the M.O.H. It may be of some interest to know that this will be just over 100 years from the date when it became obligatory under the 1872 Public Health Act for every Urban and Rural Sanitary Authority to appoint a M.O.H. Although not mandatory many of the larger towns had already appointed M.O.s.H. under the earlier Public Health Act of 1848, and Liverpool the first in the field appointed Dr. Duncan as their M.O.H. in 1847. The earliest annual report which I can find in my office is that for 1914, the year in which the Joint M.O.H. Committee came into being, which employed the same M.O.H. to cover the areas of all the constituent authorities. Since then I have all the reports to date, except that for 1917 which seems was probably never published, and they make for the most part brief but extremely interesting reading. During this period there have been nine Medical Officer's of Health, the longest serving one being Dr. Wilson who held the office from 1920 until March, 1947. The general health appears to have been notably above average for the country as a whole. In the first report the total population of the district is given as 11,158 (1911 census). This has shown a gradual upward trend with a spectacular increase after the first world war, and a more sustained and rapid rise in the period after the second war to its present figure, reflecting very largely the Ministry of Defence establishments in the area. In 1914 the births numbered 259, and deaths 113, giving a death rate of 10.1 per 1,000 population. Infant mortality is given as 42.47 per 1,000 live births at a time when the national figure was 105. In contrast last years figure for the Rural District was 20.0 per 1,000 live births. At this time the M.O.H. was clearly very pre-occupied with the control of infectious disease, notably diphtheria, pulmonary tuberculosis and scarlet fever. Clearly too, sporadic cases of enteric fever were common at a time when there was no public water supply, and main drainage of a primitive type existed only in the town of Amesbury. Mr. Fisher in his report has made brief reference to the astonishing progress in the field of environmental health which has taken place over the whole district since 1947. This is not only a great tribute

to the Council, to all my predecessors and fellow chief officers, but to him personally, since he has been a member of the Public Health Department for all this period. and for all but two and half years has held the appointment of C.P.H.I. It seems incredible that this work has been carried out with a staff so small that by today's standards one would assume such a task to be impossible. In passing, the fact that in this country in an average year the small number of cases of enteric which occur are mainly imported by the few overseas travellers, mainly to the continent of Europe, is perhaps some indication of our comparative achievements nationally in the field of environmental health. While there is much more to do, one sometimes feels too little credit has been given to the large part which local government authorities have contributed to the present state of affairs.

I am grateful to Mr. Fisher for his report to which I have already referred. I am also indebted to Dr. Lycett, the County Medical Officer for supplying details of immunisation procedures carried out during the year.

The estimated mid-year population shows a decrease of 770 which is difficult to understand, since the number of inhabited houses has shown a rise of 56. One can only assume there has been some estimated alteration in the numbers of Defence personnel to account for this figure.

The number of deaths is considerably reduced at 169, which gives an adjusted rate of 9.8, significantly lower than the national average. Infant mortality at 20, is better than last year, but is still consistently slightly higher than the national average. Twenty-eight deaths occurred as a result of malignant disease, half the number recorded last year. Of these seven were due to lung cancer. Deaths from coronary heart disease were slightly less at thirty-five, and deaths from respiratory disease, seventeen, also slightly reduced. I believe it is well known generally that in approximately nine cases out of ten for practical purposes lung cancer is caused by cigarette smoking, that the incidence rate for coronary heart disease is much higher in smokers, particularly in younger smokers, and that chronic bronchitis if not caused by the habit is severely adversely affected by it once acquired. I continue to be surprised by the hold the cigarette has, particularly on intelligent people, who continue to smoke in the knowledge that for many of them their health will be damaged and their expectation of life reduced.

Immunisation procedures reveal a fairly satisfactory situation, with approximately 71 per cent of children receiving protection against diphtheria, whooping cough, tetanus and poliomyelitis. The figure for measles is less satisfactory. We really cannot be completely satisfied until all children are protected, and in the future the N.H.S. will have to give the same priority to this matter as has been given by the County Health Department.

The demand for housing far from showing signs of slackening has increased. My latest information is there are over 800 applicants for housing on the Council's list. To some extent this has resulted from interruptions to the housing programme for the third successive year, which is most unfortunate. Undoubtedly, the major factor has been difficulty in obtaining suitable land, but the cost yardstick has also contributed to delays. While one has every sympathy with the need to keep building costs down, in my view it is inevitable that the standard of houses are suffering as a result. In particular I feel that it is false economy to build houses today without comprehensive thermal insulation, to include such items as double glazing and insulation to cavity walls. This is particularly important when one is catering for the needs of the elderly who are more readily adversely affected by cold, at a time when not only is fuel becoming increasingly expensive, but could become scarce as well. I believe too, that we should give greater consideration to the design of all houses, particularly to the ground floor to ensure that they can be easily negotiated by a person confined to a wheel chair. Such things as wide doorways and lever handles to taps and doors should become standard practice. If this were done there would in the long run be no basic increase in cost as at present when they have to be a special specification.

This has been yet another exacting year for Local Authority staff, and I am very pleased that the members of the Public Health Department, all credit to them, have managed to maintain their high standards of performance, often in very difficult circumstances.

In previous reports I have stressed the need to establish a close relationship between the future N.H.S. Medical Adviser and the Public Health Inspector in control of the Environmental Health Department in the new District Councils. In the Salisbury District Council, although I would have preferred separate departments concerned with Environmental Health and Housing, I am glad that the first incumbent of the post of Controller of Housing and Environmental Health Services is to be a Public Health Inspector. Whatever happens in the future I am certain that it will be necessary to ensure that there is always free and unfettered two-way communication between the Medical Adviser and the Public Health Inspector primarily responsible to the Council for public health matters — particularly important in the control of communicable disease.

In his annual report the Chief Public Health Inspector of the Borough of Marlborough has referred to the wastage of young able public health inspectors. The future of public health depends very much on ensuring adequate recruitment to the profession, both as to numbers and quality, which in turn depend on a satisfactory career expectation. Since public health inspectors, unlike engineers, surveyors and financial officers, virtually do not exist outside the local authority field, the responsibility

for this is a matter for local government. I regret that unlike the Chief Inspector of Weights and Measures, the appointment of a Chief Public Health Inspector is no longer to be a statutory one. I am also sorry that public health inspectors are to lose their security of tenure. A more recent factor which will I believe adversely affect both public health and the Public Health Inspectorate is the almost certain loss of responsibility for the control of meat inspection, and probably also "meat based products" to the veterinary profession in order to comply and harmonise with E.E.C. procedures. This I regard as a most unfortunate retrograde step involving fragmentation of responsibility for food hygiene at local authority level. My special report as to the effects of this legislation on poultry meat inspection is attached as an appendix.

Finally, I should specifically like to thank Mr. Fisher and his staff, Dr. Lishman for acting as my Deputy, Dr. Wormald and the staff of the Public Health Laboratory for their continued help and frequent valued advice, and my secretary, Miss Boswell for her help and co-operation, particularly for her help in preparing this annual report.

I have the honour to be,

Your obedient servant,

F. D. F. STEEDE,

Medical Officer of Health.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area in acres	...	...	...	...	63,455
Number of Parishes	...	...	...	...	17
Population, Registrar General's mid-year estimate	...	...	...	...	28,570
Number of inhabited houses, flats and bungalows	...	...	...	...	5,669
Number of houses, flats and bungalows owned by the Council	...	...	...	...	1,714
Rateable value as at 1st April, 1972	...	...	...	...	£1,236,236
Product of penny rate (estimated) as at 1st April, 1972	...	...	...	...	£11,962

VITAL STATISTICS

	M.	F.	Total
LIVE BIRTHS—Legitimate	291	266	557
Illegitimate	18	15	33
Totals	309	281	590
Live birth rate per 1,000 population			20.7
Illegitimate live births per cent of total live births			6.0
Stillbirths—Legitimate	3	3	6
Illegitimate	—	—	—
Totals	3	3	6
Stillbirth rate per 1,000 total live and stillbirths			10.0
Total live and stillbirths—Legitimate	294	269	563
Illegitimate	18	15	33
Totals	312	284	596
DEATHS	91	78	169
Death rate per 1,000 population			5.9
Infant deaths under one year—Legitimate	7	5	12
Illegitimate	—	—	—
Totals	7	5	12
Infant mortality rate per 1,000 live births			20.0
Legitimate infant deaths under one year per 1,000 legitimate live births			22.0
Neonatal deaths (under four weeks)—Legitimate	4	2	6
Illegitimate	—	—	—
Totals	4	2	6
Neonatal mortality rate per 1,000 live births			10.0
Early neonatal deaths (under one week)—Legitimate	3	—	3
Illegitimate	—	—	—
Totals	3	—	3
Early neonatal mortality rate per 1,000 total live births			5.0
Perinatal mortality rate (stillbirths and deaths, under one week combined per 1,000 total live and stillbirths)			15.0

Year	1968	1969	1970	1971	1972
Infant deaths	17	12	12	17	12
Infant mortality rate	27.0	19.0	19.0	26.0	20.0

CAUSES OF DEATH, 1972

<i>Cause of death</i>			<i>Male</i>	<i>Female</i>	<i>Total</i>
B4	Enteritis and other diarrhoeal diseases	...	—	1	1
B19 (1)	Malignant neoplasm, buccal cavity etc.	...	1	1	2
B19 (3)	Malignant neoplasm—stomach	...	2	—	2
B19 (4)	Malignant neoplasm—intestine	...	2	—	2
B19 (6)	Malignant neoplasm—lung, bronchus	...	3	4	7
B19 (7)	Malignant neoplasm—breast	...	—	2	2
B19 (8)	Malignant neoplasm—uterus	...	—	2	2
B19 (11)	Other malignant neoplasms	...	5	6	11
B21	Diabetes mellitus	...	1	1	2
B46 (5)	Other diseases of nervous system	...	1	1	2
B27	Hypertensive disease	...	2	1	3
B28	Ischaemic heart disease	...	27	8	35
B29	Other forms of heart disease	...	8	6	14
B30	Cerebrovascular disease	...	10	16	26
B46 (6)	Other diseases of circulatory system	...	2	6	8
B31	Influenza	...	—	1	1
B32	Pneumonia	...	3	4	7
B33 (1)	Bronchitis and emphysema	...	4	—	4
B33 (2)	Asthma	...	1	—	1
B46 (7)	Other diseases of respiratory system	...	3	2	5
B34	Peptic ulcer	...	1	1	2
B46 (8)	Other diseases of digestive system	...	—	1	1
B38	Nephritis and nephrosis	...	1	—	1
B46 (9)	Other diseases, genito-urinary system	...	—	1	1
B46 (11)	Diseases of musculo-skeletal system	...	—	1	1
B42	Congenital anomalies	...	2	2	4
B43	Birth injury, difficult labour, etc.	...	2	—	2
B45	Symptoms and ill defined conditions	...	1	2	3
BE47	Motor vehicle accidents	...	2	4	6
BE48	All other accidents	...	4	2	6
BE49	Suicide and self-inflicted injuries	...	1	1	2
BE50	All other external causes	...	2	1	3
Total all causes			91	78	169

Comparison with England and Wales

	<i>per 1,000 population</i>		<i>per 1,000 Live Births</i>	<i>per 1,000 Total Births</i>
	<i>Live Births (Adjusted)</i>	<i>Death Rate (Adjusted)</i>	<i>Infant Mortality</i>	<i>Stillbirths</i>
Amesbury Rural District	17.8	9.8	20.0	10.0
England and Wales	14.8	12.1	17.0	21.0

CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR, 1972

Disease	Total cases	Admitted to Hospital	Total Deaths	Analysis of total cases in age groups											
				Under 1 year	1-	2-	3-	4-	5-9	10-14	15-24	25-34	35-44	45-64	65+
Acute encephalitis ...	1	—	—	—	—	—	—	—	—	—	1	—	—	—	
Acute meningitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Acute poliomyelitis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Anthrax ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Cholera ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Diphtheria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Dysentery ...	4	—	—	1	1	—	—	—	1	—	1	—	—	—	
Infective jaundice ...	18	—	—	—	—	—	—	2	3	1	6	5	—	1	
Leprosy ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Leptospirosis ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Malaria ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Measles ...	46	—	—	2	2	1	1	1	25	12	1	—	1	—	
Ophthalmia neonatorum ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Paratyphoid fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Plague ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Relapsing fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Scarlet fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Smallpox ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Tetanus ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Tuberculosis ...	2	—	—	—	—	—	—	—	—	—	1	—	—	1	
Typhoid fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Typhus ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Whooping cough ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Yellow fever ...	1	—	—	—	—	—	1	—	—	—	—	—	—	—	
Totals ...	72	—	—	3	3	1	2	3	29	13	10	5	1	1	

IMMUNISATION STATISTICS

Diphtheria, Whooping cough, Tetanus, Measles and Poliomyelitis Immunisation

Year of Birth		1972	1971	1970	1969	1968	1963 -67	1957 -62	Others under 16
Primary immunisations completed during 1972	Diph.	151	232	16	5	3	12	2	—
	Wh/c.	150	229	15	3	3	1	—	—
	Tet.	151	232	16	5	3	14	6	—
	M'sles.	—	272	71	24	16	21	1	—
	Polio.	151	234	13	4	3	9	—	—
Reinforcing immunisations given in 1972	Dlph.	—	88	163	12	75	316	2	—
	Wh/c.	—	82	151	6	—	—	—	—
	Tet.	—	88	164	12	77	320	14	—
	Polio.	—	85	138	13	74	336	3	—

Smallpox Vaccination

(Vaccination discontinued as a routine measure in early childhood
September, 1971)

Age Group	Months				Year		
	0-3	3-6	6-9	9-12	1	2-4	5-15
Vaccinations	—	—	—	—	28	45	8
Re-vaccinations	—	—	—	—	—	—	11

NATIONAL ASSISTANCE ACTS, 1948 Section 47 and 1951

No action was taken under this legislation

SPECIAL REPORT BY THE MEDICAL OFFICER OF HEALTH CIRCULAR FSH 1/73 — POULTRY MEAT HYGIENE

This circular stipulates that in order to comply with E.E.C. Directive 71/118, since in the E.E.C. countries there is no equivalent officer to that of a Public Health Inspector, the responsibility for hygienic production and inspection of poultry meat is now to come under the administrative responsibility of the Ministry of Agriculture, Fisheries and Food. This means that the work of poultry slaughterhouse approval for export purposes will be done by Ministry veterinarians and that the responsibility for poultry meat inspection for all exports to E.E.C. countries now and in the home market in 1976, will pass to veterinary officers or their trained assistants to be employed by local authorities.

I believe that this is a severely retrograde step in relation to food hygiene, since it means that at local authority level there will be an unfortunate fragmentation of responsibilities between veterinary officers on the one hand, and the Public Health Inspectorate supported by the Medical Officer of Health (or Medical Adviser in the future) on the other hand. I also believe that food hygiene is better controlled by an officer who by virtue of his training and experience is primarily interested in public health rather than in animal health as in the case of veterinarians.

The circular makes provision for ante mortem inspection and, in effect, also decrees that poultry meat inspection should be one hundred per cent. I submit that while ante mortem inspection should certainly be dealt with by veterinarians (preferably on the farm if it is to be reasonably effective, rather than at the packing station where there is bound to be a great deal of commotion when the birds are uncrated) one hundred per cent of poultry meat inspection in slaughterhouses should and could be done easily by the Public Health Inspectorate supervising trained assistants on the lines laid down in the circular. Nevertheless, it should be realised that little, if anything, will be added in the way of security to public health by substituting one hundred per cent inspection for the customary present one of spot checks carried out at packing stations by Public Health Inspectors on routine visits to monitor general hygienic conditions, since poultry meat inspection differs from that of cattle, pigs and sheep in that it is not possible to incise the carcass to expose deep seated signs of disease which could lead to condemnation. All that can be done is an inspection of the outward appearance, and because the number of trained assistants recommended allows for a maximum time for inspection of five seconds per bird to include marking with the official stamp of approval, this must be of an extremely cursory nature. Even when birds are eviscerated there are practical difficulties in correlating viscera with the bird from which it came without serious detriment to the throughput numbers. In practice, sorting out the birds which are for some reason of unsatisfactory appearance and unsaleable, whether or not they are a hazard to public health, is done extremely

efficiently at present by poultry packing station staff. For practical purposes the bird of normal appearance which is a carrier of salmonella organisms is the real public health hazard and, unfortunately, occurs all too often in this country. These birds in the vast majority of cases become infected as a result of being reared on infected animal feeding stuffs, usually imported, and often this is the beginning of a chain reaction in which not only do the poultry houses become infected, but the staff in the packing station frequently become salmonella carriers.

The solution is twofold, by:—

- (a) the elimination of infection from feeding stuffs (as has been done in at least one E.E.C. country, i.e., Denmark) and
- (b) taking steps to eliminate risks of cross infection spreading through the production lines in the slaughterhouses.

This circular, I am glad to say, does something in respect of (b) by phasing out the use of the spin chiller by 1977. This iniquitous piece of machinery was introduced in the late 1950's from America and was an important factor economically in stepping up the output potential at the expense of the serious risk of cross infection of a high proportion of the subsequent throughput whenever a bird infected with salmonella was introduced. I, and undoubtedly many of my colleagues in public health were very concerned at that time, and I made personal representations and had discussions with the Food Advisory Officer at the Ministry of Health about its use, albeit to no avail.

I feel I should point out that the hazard of bacterial food poisoning (a great deal of which goes unreported) is not confined merely to the consumer of the infected bird, for if such a bird is introduced to food premises, cross infection can and often does lead to other food becoming hazardous as a result of contamination of surfaces, utensils and, most important of all perhaps, the hands of the food handler.

I recommend that local authority associations should have second thoughts on this piece of legislation and be urged to re-open discussions with a view to having this Directive amended to allow for Public Health Inspectors to have equal powers with veterinarians in this context, so that in the United Kingdom at least, poultry meat inspection should remain the responsibility of Public Health Inspectors with medical support, including of course the Public Health Laboratory Service.

Dr. F. D. F. Steede,

East Wilts United Districts.

Acting Medical Officer of Health, Devizes
Borough and Devizes Rural District.

6th March, 1973.

AMESBURY RURAL DISTRICT COUNCIL

Report of the Chief Public Health Inspector for the Year, 1972

Redworth House,

Amesbury,

Salisbury, Wilts.

September, 1973.

To the Chairman and Members of the Council:

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my twenty-fourth Annual Report on the work carried out by the Public Health Inspector's Department during the year 1972, the contents of which cover the requirements specified by the Department of Health and Social Security in Circular 1/73.

As I write this report on the eve of completing twenty-six years service with the Council I am deeply conscious of the fact that it will be the last Annual Report I shall present to this Authority, as it will be amalgamated with other neighbouring Councils within the next few months, and when I shall be leaving the Local Government Service in which I will have been employed for almost forty-three years. I therefore feel I may be forgiven for taking a brief look at the changes which have taken place in the District since I entered the Council's service on the 22nd September, 1947, when the Surveyor's and Public Health Department was the only one staffed by full-time officers — four in number! The remainder of the Council's work was performed by professional business men engaged on a part-time basis. This arrangement continued until May, 1950 when the Council employed its first full-time Clerk with necessary Staff and shortly afterwards the joint appointments of Surveyor and Public Health Inspector were divided.

In 1947 only four Parishes, viz: Amesbury, Bulford Village, Durrington and Shrewton had a supply of mains water and Amesbury alone enjoyed the facility of a public sewerage system. As a result of the Council's efforts over the years all Parishes now have a mains water supply available and with the completion within the next few months of Stage II of the Bourne Valley Sewerage Scheme only seven of the seventeen Parishes comprising the District will not have this facility although plans for executing this work have already been made. Much progress has also been made in the field of housing, the Council having built approximately one thousand houses in this period; hundreds of houses both in the public and private sector have been improved with grant aid and an active slum clearance programme has reduced the number of unfit houses in the District to minimal proportions. Every effort has

been made to improve other services operated by the Council and all inhabitants of the District have enjoyed a weekly collection of refuse for many years.

Throughout my service with the Council I have had the good fortune to enjoy the constant support and encouragement of the various Chairmen and members of the Council, and especially of those serving on the Public Health and Housing Committees. To them I would like to express my deep sense of gratitude, also to the Medical Officers of Health with whom it has been my privilege to work, to my colleagues in other departments and last, but not least, to the staff of my Department which has remained unchanged over many years, and whose help and co-operation have done so much to ensure the satisfactory conclusion of the many tasks which fall to be undertaken by a Public Health Department.

I am, Mr. Chairman, Ladies and Gentlemen,

I. L. FISHER,

Chief Public Health Inspector.

SANITARY INSPECTION OF THE AREA

Number and Nature of Visits or Inspections during 1972

General Sanitation

Number of Inspections re Water Supply	...	...	...	34
Number of Inspections re Drainage of Property	...	...	...	526
Number of Inspections re Keeping of Animals	...	...	...	3
Number of Inspections under Pet Animals Act	...	...	...	2
Number of Inspections under Animal Boarding Establishments Act	...	...	...	9
Number of Inspections re Caravan Sites	...	...	...	125
Number of Inspections under Offices, Shops and Railway Premises Act	...	...	...	84
Number of Inspections under Factories Act	...	...	...	22
Number of Inspections of Bakehouses	...	...	...	12
Number of Inspections under Diseases of Animals (Waste Foods Order) 1957	...	...	...	14
Number of Inspections re Refuse Collection and Disposal	...	...	...	1
Number of Inspections under Prevention of Damage by Pests Act, 1949	...	...	...	38
Number of Inspections under Noise Abatement Act	...	...	...	1
Number of Visits re Sampling of Water Supplies	...	...	...	262
Number of Visits re Sampling of Sewage Effluent	...	...	...	14
Number of Houses inspected re Verminous Conditions	...	...	...	2
Number of Miscellaneous Sanitary Visits	...	...	...	366

Housing

Number of Houses inspected under Public Health Act	...	...	...	21
Number of Visits paid to above Houses (re-inspections)	...	...	...	19
				—
Number of Houses inspected under Housing Act (General)	...	...	...	53
Number of Visits paid to above Houses (re-inspections)	...	...	...	206
				—
				259
Number of Houses inspected under Housing Act (Improvement Grants)	...	...	...	36
Number of Visits paid to above Houses (re-inspections)	...	...	...	248
				—
				284
Number of Houses inspected under Housing Act (Overcrowding)	...	...	...	2
Number of Visits paid to above Houses (re-inspections)	...	...	...	2
				—
				4
Number of Miscellaneous Housing Visits	...	...	...	291
Number of Property Owners/Agents and Builders Interviewed	121

Notifiable Diseases

Visits in cases of Notifiable Disease	149
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Meat and Food Inspections

Number of Visits to Poultry Packing Stations	85
Number of Visits to Knackers Yard	...	...	...	...	9
Number of Visits to Bakers and Confectioners	...	...	...	...	3
Number of Visits to Butchers Shops	...	...	...	...	25
Number of Visits to Cafes and Restaurants	...	...	...	...	31
Number of Visits to Licensed Premises	...	...	...	...	6
Number of Visits to Dairies and Milk Distributors	...	...	...	...	15
Number of Visits to Fried Fish Shops	...	...	...	...	4
Number of Visits to Grocers	...	...	...	...	73
Number of Visits to Greengrocers and Fruiterers	...	...	...	...	1
Number of Visits to Ice-cream Premises	...	...	...	...	15
Number of Visits to Street Vendors	...	...	...	...	3
Miscellaneous Food Visits	...	...	...	...	45

2857

FACTORIES ACT 1961

Routine inspections were made of Factories for the purposes of provisions as to health, and showed that the requirements of Section 7 of the Act were in the main being complied with.

The following list shows the numbers and types of registered factories in the district:

Bakers and Confectioners	...	...	2
Engineering, including Garages	...	...	20
Joinery, Woodworking	...	...	7
Test Flow Meters	...	...	1
Laundering and Dry Cleaning	...	...	3
Grain Drying	...	...	1
Manufacture of Explosives	...	...	2
Vehicle Painting	...	...	1
Tailoring	...	...	1
Aircraft Testing	...	...	1
Instrument Repairs	...	...	1
Fibreglass and Resin Moulding	...	...	3
Cine Film Camera Testing	...	...	1
Cinematograph Film Manufacture	...	...	1
Oil Gas	...	...	1
Radio and Electric Equipment Repairs	...	...	2
Upholstery and Furniture Repairs	...	...	1
Manufacture of Surgical Appliances	...	...	1
Manufacture of Carboard Boxes	...	...	1
Manufacture of Meat Products	...	...	1
			53

The amount of outwork carried out in the district is very small and inspections were made of any properties in respect of which notification was received. In no case was it found necessary to take any action.

HOUSING

The systematic inspections of houses required by the provisions of the Housing Act and under the Public Health Act continued throughout the year and the action resulting from these inspections is shown in the table included in this report.

The number of houses improved with the aid of improvement grants remained comparable with that for the previous year. Of the seventeen properties at which works were completed, seven were carried out with the aid of Discretionary Grants amounting to £5840.53. The remaining ten properties were provided with the prescribed standard amenities and Standard Grants amounting to £2324.87 were paid towards the cost of the works.

Whilst there was no let up on the Council's part in their efforts to get building programmes moving and to secure land for future development, 1972 was again, largely one of frustration in the light of the increasing demand for housing accommodation. Following the completion of the 41 dwellings at Bulford in March, 1972, the only new development commenced was the Grouped Dwelling Scheme at Amesbury which is scheduled for completion in March 1974. Although tenders were received in August for the dwellings to be erected at Solstice Farm, Amesbury, these proved to be outside the cost yardstick limit and acceptance of the lowest tender was not possible until December. It is, therefore, likely that a period of eighteen months will elapse between the completion of the Bulford programme and the time when any of the dwellings included in the Amesbury scheme become available, and with the number of dwellings which can be expected to become available as a result of the occurrence of casual vacancies being completely inadequate to meet the demand, hardship through various causes will inevitably be suffered by many applicants on the Housing List. Many of the problems confronting the Council are bound up with the shortage of housing accommodation and until the time is reached when there is once more a continuity of building programmes these problems are likely to remain.

The number of dwellings erected in the district during the year by private enterprise building was 71 whilst a further 99 were under construction at the end of the year.

The following table shows the action taken during the year in the department under the Housing and Public Health Acts:

(i)	Inspection of housing defects under Public Health Act	...	12
(ii)	Inspection of housing defects under Housing Act	...	53
(iii)	Number of dwellings so dangerous or injurious to health as to be unfit for habitation	...	8
(iv)	Number of dwellings found not to be in all respects reasonably fit for habitation	...	43
(v)	Number of dwellings rendered fit in consequence of informal action	...	28

Action under Statutory Powers

A. Proceedings under sections 9, 10 and 12, Housing Act, 1957.

(i)	Number of dwellings where Notices were served requiring defects to be remedied	...	Nil
(ii)	Number of dwellings made fit after service of formal Notices		
(a)	By owners	...	Nil
(b)	By local authority in default of owners	...	Nil

B. Proceedings under Public Health Act

(i)	Number of dwellings where Notices were served requiring defects to be remedied	...	2
(ii)	Number of dwellings made fit after service of formal Notices		
(a)	By owners	...	2
(b)	By local authority in default of owners	...	Nil

C. Proceedings under section 16, Housing Act, 1957				
(i)	Number of Demolition Orders made	...	...	3
(ii)	Number of houses demolished as result of Demolition Orders	...	...	4
(iii)	Number of Undertakings accepted	...	...	1
(iv)	Number of Undertakings completed	...	...	Nil
D. Proceedings under Sections 42, 43, 46 and 48 Housing Act, 1957				
(i)	Number of houses in Clearance Areas upon which Demolition Orders were made	...	...	Nil
(ii)	Number of houses demolished as a result of Demolition Orders	...	...	Nil
(iii)	Number of houses in Clearance Areas which have been retained as temporary accommodation	...	...	Nil
E. Proceedings under Sections 17, 18 and 27, Housing Act, 1957 and Section 26, Housing Act, 1961				
(i)	Number of dwellings where Closing Orders were made	...	...	1
(ii)	Number of dwellings closed as a result of Closing Orders or Undertakings by owners	...	...	2
(iii)	Number of dwellings where Closing Orders were cancelled in consequence of premises being made fit	...	...	Nil
F. Proceedings under Section 76, Housing Act, 1957				
(i)	Number of cases of overcrowding discovered during year	...	...	2
(ii)	Number of cases of overcrowding abated during year	...	...	1
G. Housing Act, 1969, Part II				
(i)	Number of Improvement areas declared under Section 28(1)	...	...	Nil
H. Housing Act, 1969, Part III				
(i)	Number of qualification certificates issued under Sections 45(2) 46(3)	...	...	17

RODENT CONTROL

The service operated by the Council under the Prevention of Damage by Pests Act continued as in previous years. Whilst in my last Annual Report I expressed the opinion that if the present standard was to be maintained it might be necessary to consider increasing the staff, I felt, on reflection, that this was a matter which might best be left to be dealt with under local government reorganisation.

The number of complaints received was similar to last years figure and from a comparison of these figures there is no indication of any significant increase in the number of infestations by mice.

The following table sets out the work carried out by the Rodent Operator/Inspector during the year:

	Type of Property	
	Non-Agricultural	Agricultural
1. Number of properties in district	5482	131
2. (a) Total number of properties (including nearby premises) inspected following notification	114	2
(b) Number infested by (i) Rats ...	104	—
(ii) Mice ...	10	2
3. (a) Total number of properties inspected for rats and/or mice for reasons other than notification	1118	55
(b) Number infested by (i) Rats ...	41	29
(ii) Mice ...	—	2

The sewers in the area are now test-baited on a rota system, about one-third of the total lengths being tested each year. So far no evidence of infestation has been found.

DRAINAGE AND SEWERAGE

Work on Stage II of the Bourne Valley Sewerage Scheme which will serve the Parishes of Allington and Newton Tony was commenced during the latter part of the year, but progress was slow due to difficult ground conditions. The Scheme also includes for some enlargement of the existing Disposal Works at Hurdcott.

The new Sludge Drying Plant at Ratfyn Sewage Works, Amesbury was completed during the year, as was the work to relieve the flooding of Flower Lane, Amesbury, which has occurred from time to time as a result of the surcharging of the sewers during heavy rain storms.

WATER SUPPLY

The water supply to the district, which is mainly controlled by the South Wilts Water Board, has operated satisfactorily throughout the year. In view of the Council's responsibilities under the provisions of the Public Health Act, 1936, the policy of taking regular samples of water from the Board's water supply has been continued and during the year 50 samples were taken of water abstracted from the boreholes at Newton Tony and Shrewton and submitted for bacteriological examination. Copies of the Pathologist's report on these samples are forwarded to the Engineer of the Water Board, with whom contact is made should any unsatisfactory report be received.

One sample of each of these sources of supply was submitted for chemical examination and a copy of each report is given below:

Newton Tony

Physical Characters	...	...	...	Crystal clear, colourless: no deposit	
Chemical	...	...	...	...	Parts per million
Reaction	...	...	...	...	Alkaline pH 7.4
Saline and free Ammonia	...	...	...	...	Nil
Organic (or "albuminoid") ammonia	...	...	...	...	0.01
Oxygen absorbed from permanganate in three hours at 37 °C.	...	...	...	...	0.2
Chlorides	...	...	...	...	20
Nitrates (nitric nitrogen)	...	...	...	...	4.35
Total Hardness	...	...	...	...	227
(a) Temporary	...	...	...	...	136
(b) Permanent	...	...	...	...	91
Metals	...	...	...	...	Nil
Nitrates (nitrous nitrogen)	...	...	...	...	Nil
Fluoride	...	...	...	...	0.08
Opinion: Satisfactory					

Shrewton

Physical Characters	...	...	...	Crystal clear, colourless: no deposit	
Chemical	...	...	...	...	Parts per million
Reaction	...	...	...	...	Alkaline pH 7.6
Saline and free Ammonia	...	...	...	...	Nil
Organic (or "albuminoid") ammonia	...	...	...	...	0.01
Oxygen absorbed from permanganate in three hours at 37 °C.	...	...	...	...	0.2
Chlorides	...	...	...	...	18.5
Nitrates (nitric nitrogen)	...	...	...	...	3.4
Total Hardness	...	...	...	...	232
(a) Temporary	...	...	...	...	160
(b) Permanent	...	...	...	...	71.5
Metals	...	...	...	...	Nil
Nitrates (nitrous nitrogen)	...	...	...	...	Nil
Fluoride	...	...	...	...	0.03
Opinion: Satisfactory					

Other Supplies

The undermentioned parishes obtain a supply of water from undertakings not owned by the Council:

Cholderton (Cholderton Water Board).

Tilshead and Figheldean (supplies taken in bulk from the Ministry of Defence (Army)).

Samples of water taken regularly from each of the above supplies have been mainly found to be of satisfactory bacteriological quality. The appropriate authority has been contacted immediately upon the receipt of any unsatisfactory report.

There are still a number of small estate supplies in the District and each is sampled at regular intervals to ensure that they are supplying water of a satisfactory bacteriological quality. The majority of these supplies have been supplied with chlorinators and any sample failures are immediately taken up with the owner .

The following table gives details of the estimated number of dwelling houses and caravans and the estimated population in each parish supplied from public water mains. This table does not take into account Service personnel and their families and premises occupied by them, nor does it include properties obtaining piped water from private supplies.

There are no public standpipes in the district.

<i>Parish</i>	<i>Estimated Total Population</i>	<i>Estimated number of Dwelling Houses and Caravans connected direct to Public Piped Water Supplies</i>	<i>Estimated popu- lation supplied from Public Water Mains direct to Houses and Caravans</i>
Allington	500	159	485
Amesbury (excluding Boscombe Down)	4690	1247	4650
Bulford	1690	689	1690
Cholderton	220	68	207*
Durnford	440	84	365
Durrington (excluding Larkhill)	3410	970	3410
Figcheldean	860	254	860*
Idmiston	2450	660	2395
Milston	160	84	160*
Newton Tony	420	106	375
Orcheston	320	99	320
Shrewton	1800	480	1760
Tilshead	400	100	400*
Wilsford-cum-Lake	150	14	30
Winterbourne	2130	610	1980
Winterbourne Stoke	220	54	220
Woodford	460	128	319
TOTAL	20,320	5,806	19,626

* Includes population supplied from mains owned by Cholderton Water Company or by Government Departments.

INSPECTION AND SUPERVISION OF FOOD

Milk Supply

As all heat treated milk consumed in the District is processed at establishments situated outside the area, the main source of control is by means of sampling. There is still a small demand for milk retailed under the special designation "Untreated."

Samples of milk have been taken regularly from all the registered distributors in the district, including producer/retailers, and the following table shows the number of samples submitted for each examination, together with the results.

<i>Untreated Milk</i>			<i>Biological Examination</i>			<i>Heat Treated Milk</i>		
<i>No. of Samples Taken</i>	<i>Pass</i>	<i>Fail</i>	<i>No. of Samples Taken</i>	<i>Pass</i>	<i>Fail</i>	<i>No. of Samples Taken</i>	<i>Pass</i>	<i>Fail</i>
55	55	—	28	28	—	57	57	—

During the year one sample of bulk raw milk gave a Milk Ring Test + result and the culture of *Brucella Abortus* was isolated. Four of the cows in the herd, were regarded as suspect and individual samples from these animals produced a positive Milk Ring Test Result, the culture of *Brucella Abortus* being isolated in the sample taken from one cow. This animal was removed from the milking herd and individual milk samples taken from the twenty-six remaining cows in the herd proved negative. No positive Milk Ring Test results were found during subsequent sampling of the herd.

The number of Registered Milk Distributors and Dealers licensed to sell milk under special designations is as follows:—

Registered Milk Distributors in District	...	...	23
Dealers Licensed to sell Pasteurised Milk (pre-packed)			19
Dealers Licensed to sell Untreated Milk	...	...	2
Dealers Licensed to sell Ultra Heat Treated Milk	...	...	11
Dealers Licensed to sell Sterilised Milk	...	...	2

Slaughterhouses, etc.

There has been no change during the year affecting the supplies of fresh meat and poultry in the District.

Regular visits were made to the factory where poultry is processed where the throughput for the year was 604,476 Hens and 13,325 Cock-errells. Of this number 2.0 per cent weighing 13 tons 7 cwts 2 quarters 27lbs, were rejected as being unfit for human consumption.

There is one knackers yard in the district, which is also licensed for the slaughter of horses, and regular inspections made of this premises have not revealed any matters in respect of which it has been necessary to take any action.

Food Premises

The number of inspections made of food premises in the District was about the same as for last year and showed that in the main the provisions of the Food Hygiene Regulations were being complied with.

The number of food premises subject to these Regulations and the categories of trade carried on in them is as follows:

Hotels and Licensed Premises	...	39
Grocers	... ..	47
Bakers	... ..	4
Butchers	... ..	11
Cafes and Restaurants	... ..	13
Confectioners	... ..	24
Fish Fryers	... ..	3
Fishmongers	... ..	2
Greengrocers	... ..	5
TOTAL		148

No ice-cream is manufactured in the district and routine inspection of the premises registered for the storage and/or sale of ice-cream have shown that the requirements of the Regulations are being complied with.

Meat and Other Food Condemned during 1972

The quantity of meat and other food condemned during 1972 as being unfit for human consumption is given below:

Tins and/or packets of Fish	...	141
Tins and/or packets of Meat	...	178
Tins and/or packets of Vegetables	...	179
Tins and/or packets of Pastry	...	37
Tins and/or packets of Fruit	...	35
Tins Milk and Cream	... ..	4633
Tomato Paste, 5kg. tins	... ..	1169
Tins of Frankfurters	... ..	20
German Bread, loaves	... ..	22
Meat	... ..	4 lbs.
Fish	... ..	126 lbs.

Diseases of Animals (Waste Foods) Order, 1957

Regular inspections have been made during the year of the seven premises licensed by the Council for the boiling of waste food and in no case was any action found to be necessary.

Offices, Shops and Railway Premises Act, 1963 — Registration

During the year 17 new registrations were made. Of these 10 were changes of ownership and the remaining 7 were premises to which the Act had not previously applied. 6 premises were deleted from the register as being no longer applicable for registration.

Inspection

The policy of inspecting premises where changes of ownership or alteration and extension of premises had occurred continued during the year. In this respect co-operation between departments in notifying to the Inspectorate of changes which came to their attention was invaluable and made early inspection of those premises possible. Many other re-inspections were also carried out.

Once again the NAAFI Warehouse, which employs up to 200 persons was visited, but inspection was only made of the offices and canteen, where only a small proportion of the total staff work. As mentioned in the narrative report for 1971 it is still felt that some legislation should be passed to safeguard all the workers in this Warehouse.

FACTORIES ACT, 1961

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH
IN RESPECT OF THE YEAR 1972 FOR THE RURAL DISTRICT OF AMESBURY
IN THE COUNTY OF WILTSHIRE

Prescribed Particulars on the Administration of the Factories Act 1961

PART I OF THE ACT

1. INSPECTIONS for purposes of provisions as to health (including inspections made by Public Health Inspectors).

Premises (1)	Number on Register (2)	Number of		
		Inspections (3)	Written Notices (4)	Occupiers prosecuted (5)
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	—	—	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	53	22	—	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises)	—	—	—	—
Total ...	53	22	—	—

2. Cases in which DEFECTS were found.

<i>Particulars</i> (1)	<i>Number of cases in which defects were found</i>				<i>Number of cases in which prosecutions were instituted</i> (6)
	<i>Found</i> (2)	<i>Remedied</i> (3)	<i>Referred</i> <i>To H.M. Inspector</i> (4)		<i>By H.M. Inspector</i> (5)
Want of cleanliness (S.1)	—	—	—	—	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3)	—	—	—	—	—
Inadequate ventilation (S.4)	—	—	—	—	—
Ineffective drainage of floors (S.6)	—	—	—	—	—
Sanitary Conveniences (S.7)					—
(a) Insufficient ...	—	—	—	—	
(b) Unsuitable or defective ...	—	—	—	—	—
(c) Not separate for sexes ...	—	—	—	—	—
Other offences against the Act (not including offences relating to Outwork) ...	—	—	—	—	—
Total ...	—	—	—	—	—

PART VIII OF THE ACT

(Sections 133 and 134)

NIL RETURN

